

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	T.D.		5/6/99
O.I.P.E. CLASSIFIER		25	5/10/99
FORMALITY REVIEW	ONB	10303	5-19

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
Final	6/2/99
Original	6/2/99
1	6/2/99
2	6/2/99
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here